

IN THE CLAIMS:

Original claims 1-42 have been replaced with new claims 1-22.

REMARKS

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Claims 1-42 in the parent application (S/N 09/201,953) were subject to a Restriction Requirement between the following groups:

Group:	Claims:	Description:
I	1-16 and 19-42	Method for manufacturing a vascular graft
II	17-18	Endovascular graft system and method of implantation

Group I claims were prosecuted in the parent application. New

15 claims 1-22 submitted herewith are drawn to a vascular graft.

The changes to the Abstract are indicated in the attached Appendix.

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Respectfully submitted,



Peter Jon Gluck, Esq.

PTO Reg. No. 38,022

PATENT COUNSEL

Edwards Lifesciences LLC

Attorney for Applicant

Under 37 C.F.R. 1.34(a)

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APPENDIX

The following shows the changes made to the Abstract:

5 A method for improving the radial enlargeability and other properties of tape-reinforced tubular vascular graft formed of sintered fluoropolymer(s), such as expanded, sintered PTFE. Broadly, the method comprises the step of radially shrinking the reinforcement tape layer. The graft includes a base graft and a reinforcing tape applied thereto. The

10 tape may be spirally wrapped about the graft or spirally wrapped into a tube about of the graft, or the entire tape-reinforced graft, after sintering thereof. Such radial shrinkage of the reinforcement tape layer, or of the entire graft, renders the a cylindrical mandrel and then applied to the exterior of the graft. Radial shrinkage of the combined base graft and

15 tape, or of the reinforcing tape tube, renders the vascular graft subsequently radially enlargeable by more than 5%, without tearing or breaking of the reinforcement tape layer of the graft. Radially enlargeable grafts of the present invention may be combined with various types of stents or anchoring systems, to form endovascular graft devices

20 which are transluminally insertable and implantable within the lumen of a host blood vessel. Alternatively, radially enlargeable grafts of the present invention may be implanted by way of traditional surgical graft implantation techniques, without any radial enlargement of the graft at the time of implantation, so as to take advantage of the improved

25 strength properties and suture-holding properties of the radially-shrunk tape-reinforced grafts of the present invention.